The Campus Bulletin

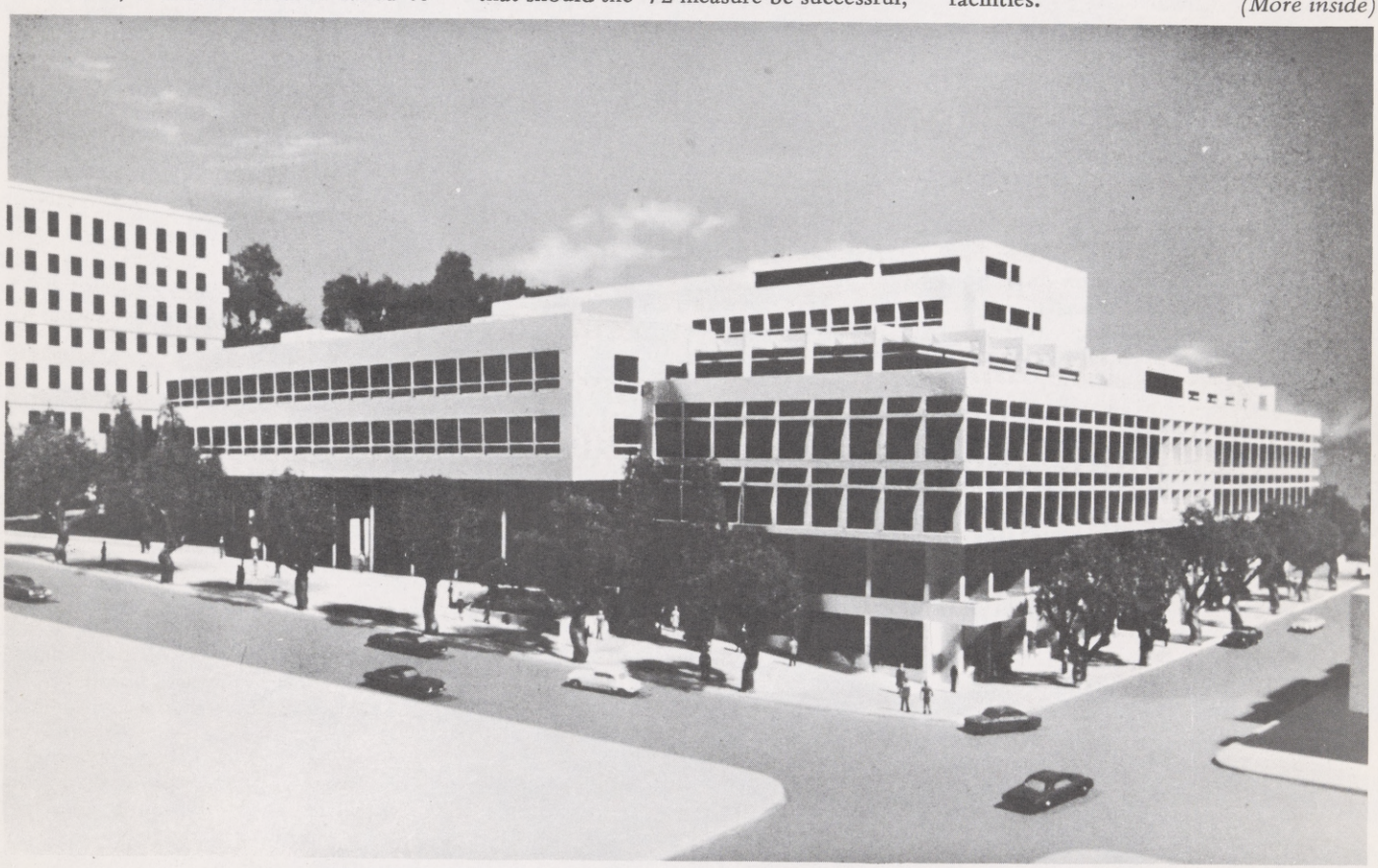
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO OCTOBER, 1972 Volume 5, Number 6

WHAT IS THE HEALTH SCIENCES FACILITIES BOND ISSUE?

In June, the California State Legislature approved, and the Governor signed, a bill to place a $155.9 million bond issue for Health Sciences Facilities on the November 7, 1972 ballot.

In 1970, a similar measure failed to pass by 4%. Post-election studies showed that too many voters had inadequate information. The majority of informed voters were for the measure.

The legislation (S.B. 220) provides that should the '72 measure be successful, a second bond issue will be placed on the ballot automatically in 1976 without further legislative approval. The 1976 measure would provide for issuance of an additional $138.1 million for health science facilities. *(More inside)*



PROPOSED SCHOOL OF DENTISTRY BUILDING

The School of Dentistry at UCSF is badly in need of the proposed new building – a facility all its own.

At present, the School is located on a grand total of 24 different floors in ten different buildings. Patients must go from one place to the other to receive treatment; and students' facilities are crowded, equipment is as old as the School itself, and laboratory and classroom space is scattered throughout the campus.

The plans are done, but the go-ahead rests on the passage of Proposition 2, the Health Sciences Facilities Bond Issue.

The School of Dentistry is only one of UC's needs to bring better health care to Californians. More on Proposition 2 inside.

Although clinic patients receive the best of care, conditions are crowded and becoming increasingly crowded every day. The nearly-completed new Clinics Building will alleviate the space problem, and will help our outpatient clinics to function more efficiently. But what will happen if the number of doctors, nurses, pharmacists and other health personnel isn't increased? UCSF needs to train more of these health care personnel. Proposition 2 will mean better health for all Californians.

PROPOSITION 2 WILL BENEFIT CALIFORNIA RESIDENTS

Proposition 2 will mean better health care for the people of California. An important fact to know is that it will not increase property taxes, since its cost will not be paid from property tax sources.

California needs more doctors, dentists, nurses and other absolutely essential health personnel if people in this state are to be maintained in good health.

Crowded waiting rooms, unavailable physicians, "no house calls," and skyrocketing costs are only some indications of an impending health care crisis. Other indications are more serious:

**All California medical schools combined – public and private – produce only 600 physicians annually, yet three times that number will be required annually just to maintain the existing California ratio of physicians to population.

**California's medical and dental schools are forced to turn away 90 to 95% of the qualified applications because space and training facilities can take just so many students. These problems are worsening every year.

By increasing the supply of health care personnel and services in the face of rapidly growing demand, Proposition 2 will help to control spiralling health care costs. It will do so at the cost of just 50¢ per year per person over the life of the bonds and it will bring to California nearly $100 million in federal matching funds to help us achieve this goal.

By dramatically increasing California's output of physicians, dentists, nurses, optometrists, medical researchers, pharmacists and veterinarians, Proposition 2 will help assure that California citizens will not needlessly suffer and even die for lack of medical care when they need it.

HOW PASSAGE OF PROPOSITION 2 WILL BENEFIT UCSF

In general, passage of the Health Sciences Facilities Bond Issue, Proposition #2, will enable the UCSF campus to expand its health facilities, replace old equipment, increase student enrollment, improve patient services; and, by doing so, extend the benefits of new medical knowledge to more Californians.

Because of the serious shortage of health manpower, it is crucial that more students be admitted for training. Lack of space now forces UCSF to turn down 90 to 95 percent of student applications.

Specifically, passage of Proposition #2 will provide the following at UCSF:

School of Dentistry

The need for more dentists is clear, but increasing enrollment isn't possible without a new building. Present dental classrooms and laboratories are spread over 24 floors in ten different buildings. Says Dr. Ben W. Pavone, Dean of the School, "We are the only dental school in the country without a building of its own."

Equipment is old and outmoded. Clinic patients are provided high quality, low cost dental care, but the clinic quarters are cramped and provide no privacy for patients. The floor is warped, and where treatment chairs are reclined, it is necessary for students and faculty to crawl over the patient's head when trying to pass in between chairs. The school stands in danger of losing its accreditation because of its obsolete physical plant.

New facilities would provide for expansion of outstanding research and treatment programs that extend such valuable benefits to Californians as the Oral Cancer Clinic (which treats victims of oral cancer, restores features of victims whose jaws, mouths and noses have been damaged by malignancies), and the Cleft Palate and Cleft Lip Section, which serves to correct this serious birth deformity, the second most frequent birth defect of babies in this state.

Research dealing with tooth implantation and transplantation offers hope that someday people will be able to have their lost teeth replaced with the real thing rather than with porcelain and metal substitutes.

Also, new facilities will enable more dentists to be trained in detecting early signs of oral cancer, which claims 6,000 new victims yearly in California; and to prevent tooth and gum deterioration that has resulted in more than two million Californians having to wear dentures.

Moffitt Hospital Renovation and Improvement of Patient Care Facilities

Robert A. Derzon, director of UCSF hospitals and clinics, points out that UCSF is a large referral center to which patients from all over the state are sent by their physicians for diagnosis and treatment not available in smaller communities. Consequently, the patient population has a higher ratio of severely ill people and people with complex diseases than is found in most community hospitals.

"Obviously, the best of technical equipment and facilities is needed for their care," says Derzon. "We need to replace X-ray machines that are 30 years old, and you just can't put a linear accelerator in a room that is not prepared for it."

Hospital rooms, originally built as 4-bed wards, will be altered to allow for more patient privacy. Clinical laboratories need expansion due to the increase in the number of sophisticated new laboratory tests used by physicians to help diagnose disease.

Life-saving programs have evolved at

(continued on page 3)

(continued from page 2)

UCSF's hospitals and advances are being made all the time. Two such programs are the Kidney Transplant Center, which performs more transplants than any other center in the world, and the Infant Intensive Care Unit, which has reduced the infant mortality rate to one quarter of the existing rate in California.

This kind of care and the training of physicians and auxiliary medical personnel require the best technical equipment and facilities possible.

Support for the Schools of Pharmacy and Human Biology

Vacating space now utilized by the School of Dentistry will make possible the expansion of the School of Pharmacy and increase the enrollment of pharmacy students. It will also provide space for the new School of Human Biology which could not be initiated before because of space limitations.

ORAL MEDICINE CITES ALARMING RISE IN CANCER AMONG WOMEN

Dr. Michael Griffith, Lecturer in Oral Biology, School of Dentistry, states that oral cancer this year will afflict 1800 to 2,000 people in California alone, and that oral cancer among women is rapidly on the rise.

"Oral cancer in its early stages," he points out, "can go on for years without causing pain or discomfort to the person—until it's too late. But today the outlook is vastly improving. Until recently, the survival rate was only 30% with oral cancer."

Dental students are being taught at UCSF how to recognize oral cancer. Dental hygiene students learn to detect early signs in their three year training program at UCSF, and the Postgraduate Division of the School of Dentistry holds regular courses for practicing dentists to keep abreast of new treatments and methods.

Dr. Griffith cites some startling statistics about oral cancer. "Over 90% of the oral cancer patients are smokers. And smokers make up 40% of the population.

"And women are smoking more and getting more cancer of the mouth as a result."

These facts were reported by Dr. Griffith and Dr. Sol Silverman, Jr., who is Professor and Chairman of the Division of Oral Biology, here, in an article published by the Journal of the American Dental Association. They also said that smokers had a six times greater risk of developing oral cancer than non-smokers, and for women the risk was nine times greater.

Drs. Silverman and Griffith studied 104 men and 70 women with oral cancer and found that 80% of them habitually smoked cigarettes – most of them even after the cancer was diagnosed.

Those who quit or reduced their cigarette habit also reduced the risk of a secondary primary cancer of the mouth.

It was also found that women showed a "greater reluctance" to cut down or stop smoking, contributing to the higher risk as compared with men.

"Some patients are predisposed to cancer," Dr. Griffith says. "You can't predict who will and who won't get cancer; but if you smoke, you do increase the chances of ill health."

Dentists and dental students look for such precancerous conditions; they are trained to recognize small white patches known as "leukoplakia," caused primarily by tobacco.

A cytology smear is taken, or, if indicated, a biopsy. A dentist is trained to look for this condition, but does not treat it. He then refers his patient to UCSF's division of oral medicine.

"People shouldn't be reluctant to check a suspicious condition," advises Dr. Griffith, "because cancer – if caught early – is treatable and curable." Treatment consists of radiation therapy or surgery, or if indicated, a combination of both.

The Division of Oral Medicine here provides not only medical care for the victim of oral cancer, but includes psychiatric counseling, social workers, fitting of prosthodontic devices, and continuous follow-up.

UCSF-STAFFED TRAUMA CENTER AT SFGH – ONE OF NATION'S BEST

Senator Alan Cranston spoke this month at the Dedication Ceremonies of the Trauma Center. Because of his interest in Emergency Care, he has introduced legislation to try and improve emergency care in this country.

The Trauma Center at San Francisco General Hospital, staffed by UCSF physicians (below) serves to train young interns and residents in an interdisciplinary approach to emergency care – pediatrics, neurosurgery, cardiology, pathology, anesthesiology, and general surgery.

One of the finest in the nation, the Trauma Center at SFGH is one of ten such centers, and the only one on the west coast to receive a major grant from the National Institute of General Medical Sciences, NIH. The Grant, in the amount of $513,000 was awarded to the UCSF School of Medicine and San Francisco General Hospital, to study trauma and to improve the care of critically ill persons.

F. William Blaisdell, M.D., Chief of Surgery at SFGH and Professor of Surgery at SFGH and Professor of Surgery at UCSF, is principal investigator.

Dr. George F. Sheldon, Assistant Professor of Surgery, is Chief of the Trauma Service at SFGH.

UNITED BAY AREA CRUSADE

The Annual Campus drive for the United Bay Area Crusade is currently underway. This year marks the 50th Anniversary of the United Crusade, which substantially supports over 200 organizations with the funds that are collected through its yearly campaign in the 5 Bay Area Counties. Many of these organizations are dependent on the United Crusade for well over 50% of their annual budgets.

Represented among the many service-centers that U.B.A.C. funds are: Cerebral Palsy Organizations for the Bay Area, Day Care Centers, Family Service Agencies, Legal Aid Societies, San Francisco Senior Center, and new programs to provide aid for drug counseling and rehabilitation, and to the research of sickle cell anemia. Without the funds raised in this once-a-year appeal, it would not be possible for many of these agencies to provide their services for the people in our community.

It is essential to the medical center and the Bay Area to have strong and effective voluntary organizations such as these to supplement and complement the work of governmental agencies and our own University programs of public service.

We strongly urge the support of all Campus employees in this year's drive for the United Bay Area Crusade.

HUMAN TRANSPLANTS BELOW LEVEL DOCTORS WOULD LIKE

"At present surgeons in the United States could properly be doing about 10,000 kidney transplants a year – roughly four times as many as actually being done," says Dr. Samuel Kountz, associate professor of surgery at the University of California, San Francisco.

To do that many transplants, Dr. Kountz says, there should be about one major transplantation center for roughly every four million persons. "Transplantation is at an encouraging level of success. It has reached a plateau from which it can be expected to advance only with considerable effort. But nevertheless it is at a level below what doctors and medical scientists would like.

"One means of raising the level would be to have available larger numbers of human organs – kidneys, hearts, livers and others – for transplantation because this would give the doctors greater flexibility and their patients greater hope. Also, a better means of organ preservation is needed," notes Dr. Kountz.

Organ transplantation has become an important area of medicine. More than 5,000 of these have been done in recent years. "Almost half the kidney transplant patients are still alive. The total implants for hearts, livers and other organs is in the hundreds.

"Success in kidney transplantation has been greater than with other vital organs partly because the availability of artificial kidney machines makes it possible to maintain the patients for long periods of time in reasonably good health while the properly matched organ is sought," says the physician.

"The keys to kidney transplantation success are the proper matching of donor and recipient. If a proper match is achieved, the patient's immunological defenses will not destroy the transplant, and the use of drugs to surpress immunological defenses will not be needed.

"In kidney transplants the emphasis should be on the survival of the patient rather than the organ. It is preferable to let the kidney fail and be replaced by a second transplant rather than go to great lengths and heavy doses of drugs to keep the first transplant from being rejected," says the surgeon. "Second and even third transplants sometimes do well."

"Potentially," Dr. Kountz says, "heart transplantation should have a success rate almost as high as that for kidneys, and this is being achieved in some cases. The field, particularly kidney transplantation, has within recent years become too successful to be viewed as purely research. However, it is not yet successful enough to be done as a routine patient service without any research considerations."

SNOOPY AND FRIENDS VISIT MOFFITT PEDIATRIC PATIENTS

"Snoopy" came to the Pediatrics section of Moffitt Hospital at UCSF last week and brought two friends, "Flower" and "Guerrilla."

The comic strip character and his friends are members of the Ice Follies cast, and their visit was arranged by John Stapleton, a UCSF employee currently recovering from surgery.

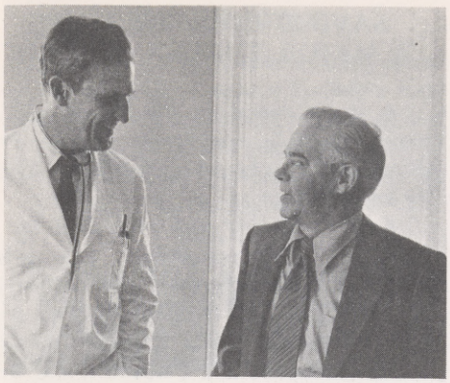
"I know how I felt as a patient in the hospital; it made me realize what it must be like for a child confined to a hospital bed. So, I got the idea of bringing a little diversion and enjoyment to these youngsters," Stapleton said.

A small party was arranged for the visitors and the day room was decorated. Those children who remained in bed were visited by Snoopy, Flower and Guerrilla. All children were given party favors and several received Snoopy dolls.

The response was so favorable that a few days later the Ice Follies group visited the Pediatrics outpatient clinic.

Guerrilla, Snoopy and Flower arrive at Moffitt Hospital.

Pedi patient Amanda Stone musters up a kiss for Guerrilla.



Dr. Benson B. Roe and William Paul

HEART TRANSPLANT PATIENT CELEBRATES ANNIVERSARY

William Paul received a new heart at 3 a.m. on August 13, 1969.

On August 14, 1972, Paul met with his physician and surgeon, Dr. Benson B. Roe, Professor of Surgery at UCSF, and with Chronicle reporter, Carolyn Anspacher, to talk about his first 3 years of new life.

"Well, I went fishing yesterday," he told Mrs. Anspacher, "and it was a good and fulfilling day." Particularly for a man who had received a new heart three years before.

Accompanied by his 22-year-old daughter, Carol, Paul told us that he swims and fishes as often as he wants.

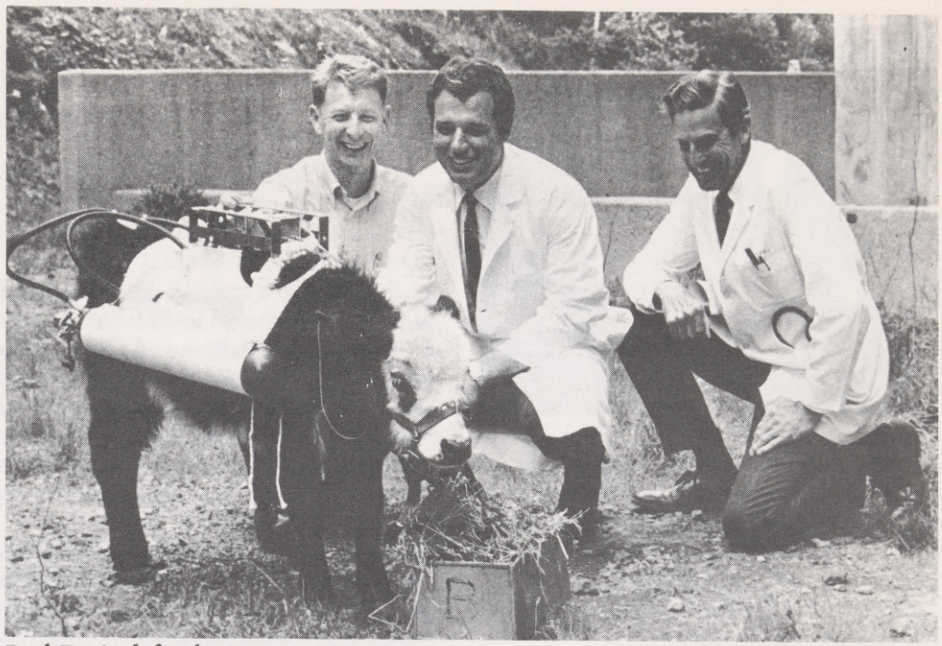
A retired master book binder, Paul has two other daughters, both married. The middle daughter chose her wedding day as August 13, 1971 – second anniversary of her father's transplant.

Although he had to give up his job at UC Berkeley's Bancroft Library, he still binds a book now and then for an old friend or two.

William Paul has the distinction of being Dr. Roe's only heart transplant patient. He is also one of five or six of the longest-living heart transplant patients in the world.

What about the future of such operations at UCSF? Currently, a research team headed by Dr. W. Carlyle Smail, resident in cardiac surgery, and Dr. Roe, is working on new ways of helping victims of heart disease.

Carol Paul and her father, William Paul



Paul Davis, left, the inventor; Dr. W. Carlyle Smail; and Dr. Benson B. Roe, right, and calf with artificial heart.

ARTIFICIAL HEART PROMISES HOPE FOR FUTURE HEART VICTIMS

By Joan Spiegelhalter

A significant breakthrough in the development of an artificial heart was described in a paper presented at the recent meetings of the Congress of the American College of Surgeons in San Francisco by Dr. W. Carlyle Smail.

Under the supervision of Dr. Benson Roe, Dr. Smail, a resident in cardiothoracic surgery, conducted the experiments with the heart pump invented by Paul Davis, an engineer, who is president of the Pacific Roller Die Company in Hayward.

Said inventor Davis: "I'd been building machines for 20 years, but anyone can make that kind of equipment; I wanted to do something really worthwhile. I figured that if people were trying to build an artificial heart I'd try too." Working in the basement of his home in his spare time, within six months he fashioned a working "heart." Then he wrote to a dozen medical schools.

His sole answer was from Dr. Roe, who thought the device looked promising enough to develop, despite the fact its inventor had no background in artificial heart research. Moreover, Dr. Roe had no funds for experimentation in this field. Nevertheless Davis continued working to refine and improve his device – as a volunteer – and working with Dr. Smail in the animal experiments of implanting the heart. In time Dr. Roe obtained some support money: $5,000 from the Academic Senate's Research Committee and $5,000 from a surgical training grant – a minuscule amount compared to the millions given to other artificial heart teams by the U.S. Government.

The Davis pump is made of polycarbonate plastic, weighs only 12 ounces, and is driven by compressed air. It is scientifically unique in that no large external controls are needed to regulate it, simply a small box located outside the body which regulates compressed air that pushes the pump's piston. It has been successfully implanted in animals, and in a recent experiment it kept a calf alive and frisky for a full week.

Davis has now designed a two-chambered pump to replace the function of the entire heart (the present model functions essentially as a left ventricle, which is the major pumping chamber of a normal heart). The double-chambered heart will be implanted in future experiments.

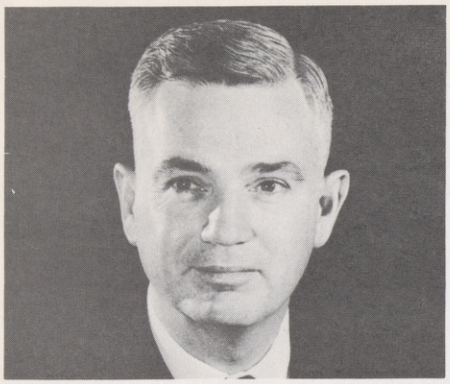
ERRATUM – "CHALUTZ"

In the September issue of the Campus Bulletin, the cover story of "Chalutz" – a film about the School of Dentistry's Mobile Clinics in Israel – inadvertantly did not mention the makers of the award-winning film about the pioneer dental project.

Richard Beindorf and Jonathan Flaccus, members of the CORT Motion Picture Division, produced the film. They also arranged the music, artwork, script, and did the editing.

Robert Steinberg, a Bay Area resident and senior at New York University, was location director.

DR. FRANCIS SOOY NAMED UCSF ACTING CHANCELLOR



U.C. President Charles J. Hitch has appointed Dr. Francis A. Sooy, Professor of Otolaryngology, Acting Chancellor at the University of California, San Francisco. The announcement was made by Dean A. Watkins, Chairman of the UC Board of Regents, at their September meeting in San Francisco.

Dr. Sooy's appointment will be effective October 1.

Dr. Sooy, a native Californian, attended Taft Union High School and Taft Junior College. He received his A.B. from UC Berkeley and his M.D. degree from UCSF in 1941. He has served on the UCSF faculty since 1946. He was Chairman of the Division of Otolaryngology in the Department of Surgery from 1958 to 1967. When the Division received full departmental status in 1967, Dr. Sooy was named Chairman of the Department of Otolaryngology.

His contributions to the University over the last thirty years are too numerous to mention. A few of those include his service as Chairman of the Academic Senate Budget Committee; Chairman, Statewide Assembly of the Academic Senate; and Chairman of the Statewide Academic Council. He is also Senior Class Advisor, School of Medicine.

He is a member of Phi Beta Kappa, Alpha Omega Alpha, and in 1953 was selected by *Time* Magazine as one of the "One Hundred Leaders of Tommorrow."

Dr. Sooy is a consulting staff member of Mt. Zion Hospital and Medical Center, Children's Hospital and Adult Medical Center, San Francisco General Hospital, and Franklin, St. Mary's, St. Francis and Veteran's Administration Hospitals, in San Francisco, Oak Knoll Naval Hospital, Oakland, and other Bay Area community hospitals.

He holds membership in the American Academy of Ophthalmology and Otolaryngology, American Laryngological Rhinological and Otological Society, American Laryngological Association, American Otological Society, the New York Academy of Sciences, the Pan American Association, of Oto-Rhino-Laryngology and Broncho-Esophagology, American College of Surgeons, American Board of Otolaryngology, the AMA, CMA, and S.F. County Medical Society, San Francisco Hearing Society, and the California ENT Legislative Committee. He is a Fellow of the American Association for the Advancement of Science and is currently president-elect of the Pacific Coast Oto-Opthalmological Society.

Dr. Sooy and his wife, Elizabeth reside in San Francisco. They have five children, Charles Daniel, 25; Jane Anne, 23; Elizabeth, 18; and twins Frances and Adrian, 15.

SAN FRANCISCO GENERAL HOSPITAL HAS A NEW MINI-PLAYGROUND

The children of the San Francisco General Hospital Pediatrics Clinic will observe the first day of summer, Wednesday, June 21, with the official opening of their own mini-playground. Located outside Building 80, the Pediatrics Unit, the playground includes a climbing tower of rustic poles with decks and a slide, surrounded by a sandbox and lawns, and shaded by pine trees.

The mini-playground is a welcome addition for many parents who come to the clinic accompanied by several children, even though only one may need medical attention. Instead of having to wait inside, adding to the congestion, these young visitors will be able to use the new play area under supervision of volunteers.

Because the City's tax supported hospital has no funds for a project of this kind, the mini-playground would not have been possible without the help of generous individuals and organizations. The project was initiated by the Department of Pediatrics nursing staff with the assistance of members of the University of California Doctors' Wives Junior Branch, who serve as volunteers in the Pediatrics Clinic. It was financed by the Volunteer Auxiliary to San Francisco General Hospital through the Lurline Matson Roth and Jean Reichert Funds.

The site was professionally landscaped by Walter Kocian, Landscape Architect, Engineering Division, Recreation and Park Dept. The climbing tower, by Northwest Design Products, Tacoma, Washington, and the redwood deck, were constructed by John Crow of San Francisco.

SAVING INFANTS' LIVES A MAJOR THRUST AT UCSF

A major threat to the life of a premature baby is respiratory distress syndrome (RDS), a breathing problem caused by immature lungs.

A test, devised and evaluated by a team of UCSF researchers, Drs. John Clements, Arnold Platzker, Robert Creasy, Alan Margolis and William Tooley; and UCLA researchers Drs. Donald Tierney, Calvin Hobel, Donald Thibeault, and William Oh, predict the occurrence of RDS before birth.

The test can be done easily in a clinic or ward using a procedure called amniocentesis. A needle is inserted into the uterus to obtain a sample of the amniotic fluid that surrounds the baby.

Some of this fluid comes from the lungs and carries with it pulmonary surfactant, a substance that forms a film on the surface of the tiny airsacs lining the unborn baby's lungs.

Normally the surfactant prevents lung collapse when the baby begins breathing, but if he is born without enough of it, he suffers acute respiratory distress at birth. This condition causes some 25,000 deaths each year among newborns in the U.S. alone.

The laboratory test for surfactant is simpler and faster than any other yet developed.

Negative tests alert a specially trained team to initiate life-saving artificial ventilation and other procedures to treat the baby as soon as it is born. If the test indicates an adequate level of surfactant, the baby will be delivered free of respiratory distress.

In a study carried out at Harbor Hospital/UCLA and Moffitt Hospital/UCSF, the researchers obtained consistently accurate results from the test. They feel that its ability to predict the occurrence of RDS – without expensive equipment or time-consuming techniques – will guide physicians in such decisions as timing induction of labor, inhibition of premature labor, and the course of action to be taken with an infant whose birth is imminent.

Researchers represented several fields– obstetrics, pediatrics, physiology, and laboratory sciences – in developing and evaluating the new test for surfactant. As one of the researchers observed, "With expertise from many sources, we were able to apply quickly the results of basic scientific research to a clinical problem. This is the ideal setting for progress in medicine."

BULLETIN BRIEFS

Sheldon Wolff, Ph.D., has been appointed as the Radiation Research Society's Representative to the Division of Biology and Agriculture of the National Academy of Sciences/National Research Council. His appointment will run through 1974.

* * *

E.W. Ferber, D.D.S., has been reappointed to serve a term of three years as Chief of Clinical Service of Dentistry, Children's Hospital, San Francisco.

* * *

H. Hugh Fudenberg, M.D., Ernest Kun, M.D. and *Thomas Singer, Ph.D.,* have each been awarded grants from the American Cancer Society, to study, respectively, the body's immune mechanism; processes of living cells related to malignant growth; and enzyme reactions in normal and diseased livers.

* * *

Three UCSF staff have been elected officers of the San Francisco Heart Association: *Robert Biben, M.D.,* Associate Clinical Professor of Medicine, president; *Richard Ferguson, M.D.,* Assistant Clinical Professor of Medicine, president-elect; and *Doris Wellenkamp, R.N.,* head nurse, Intensive Care Unit, secretary.

* * *

Anselm Strauss, Ph.D., Professor of Sociology in the School of Nursing spoke on "Staff Faces Last Days and Weeks of the Dying Patient," at the recent special workshop, "Confrontation with Dying," in Palo Alto. Also on the program were *Leon Epstein, M.D.,* associate medical director of LPNI and Vice Chairman of the Department of Psychiatry; and *Laurens White, M.D.,* Assistant Clinical Professor of Psychiatry. *Eugenia Waechter, R.N.,* Assistant Professor of Nursing, also spoke to the nearly 1,000 health care personnel.

* * *

Mildred E. Newton, R.N., former Assistant Dean of Nursing, died this summer. She became a faculty member in 1934 and remained until 1951 when she became Dean of the Ohio State University School of Nursing.

* * *

Harold A. Harper, Ph.D., Dean of the Graduate Division and Professor of Biochemistry, has been invested as a Papal Knight of the Equestrian Order of the Holy Sepulchre of Jerusalem. Ceremonies took place at St. Mary's Cathedral in San Francisco last month.

* * *

Robert H. Crede, M.D., Associate Dean of the School of Medicine and Professor and Chairman, Ambulatory and Community Medicine, was chosen the Alumnus of the Year for 1972 by his classmates during the Spring Homecoming Festivities. Dr. Crede is a member of the School of Medicine's class of 1941.

* * *

Richard G. Littlejohn, Business Manager of the School of Medicine, has been elected Chairman-Elect of the Western Region Business Officers' Section of the American Association of Medical Colleges. His term will be for 1973, at the end of which he will serve as Chairman for 1974.

* * *

Books: *Girish N. Vyas, Ph.D.,* Professor of Clinical Pathology and Laboratory Medicine; and *Rudi Schmid, M.D.,* Professor of Medicine: "Hepatitis and Blood Transfusion," (Grune & Stratton, N.Y.), 1972.

WHO

610 PARNASSUS CLOSES . . . NOT EARTHQUAKE-PROOF

The result of recent seismic studies has closed the Residence Hall at 610 Parnassus because the building is potentially unsafe.

In an announcement to the Campus, Dr. Philip R. Lee said that the conclusion of the consultants was as follows: "Considering the proximity of the site to the San Andreas fault zone, our investigation leads us to conclude that the possible ground shaking at the site may well produce catastrophic results."

The consultants further commented that the building "would not perform satisfactorily in even a modest earthquake."

Current occupants have been asked to move and steps are being taken to relocate the outgoing section of the Mailing Division as soon as possible.

"Due to the indicated potential unsafe condition of the building," Dr. Lee said, "this is the only prudent course of action."

The closing of 610 Parnassus will make it even more difficult for our single students to find housing, and guest accomodations which have been used by campus visitors in the past will no longer be available there.

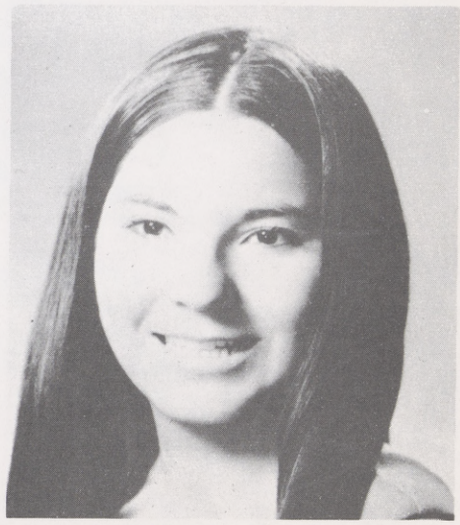
Vice Chancellor Erick Erickson's office is coordinating the closing efforts, and the Housing Office has made special efforts to assist all the students who had planned to live in the 610 Parnassus Residence Hall during the current academic year.

MISS FLORES, MEDICAL STUDENT, GETS AAUW FELLOWSHIP

Marcella M. Flores is the recipient of a Fellowship from the American Association of University Women Educational Foundation.

Miss Flores attended Fresno State College for her first 3 undergraduate years, and then was accepted to the UCSF School of Medicine in 1969 with a recommendation from the Admissions Committee as an outstanding candidate; she received her Bachelor of Science Degree in 1970, and entered the School of Medicine, where she is currently in her fourth year.

Marcella Flores plans to specialize in family medicine. She will receive her M.D. degree in June, 1973.



Marcella Flores

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WHAT'S NEW IN AFFIRMATIVE ACTION:

James Louie, New Affirmative Action Officer for A&E

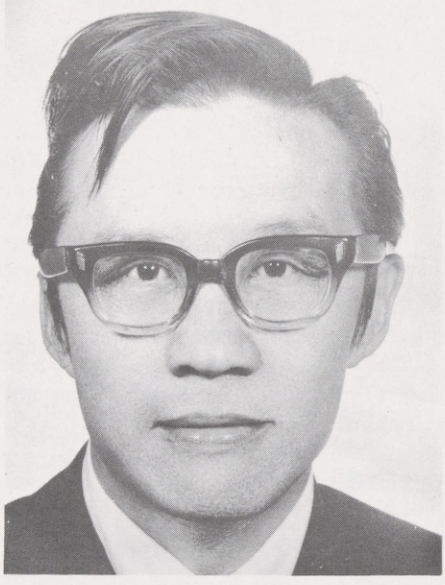
James Louie has been appointed the Affirmative Action Compliance Officer for Construction for the San Francisco campus.

"Jim has been a staff member of the Office of Architects & Engineers for over five years, and he will remain with A&E in his new assignment," said Campus Architect Herb Fifield in making the announcement.

Mr. Louie is active in community activities, both in Berkeley where he lives, and in San Francisco; his work in the community was acknowledged by a Letter of Commendation from President Nixon last year.

UCSF is the only University of California campus to have such a position. This is another commitment by the San Francisco campus to provide equal opportunities for minorities. Jim's new responsibilities include monitoring of Contractor's Affirmative Action Program commitments and general increase of minority participation in campus construction activities as contractors, sub-contractors, suppliers, and so on.

Progress reports of the Construction Affirmative Action Program will be made to the Campus Community periodically.



James Louie

HEART ASSOCIATION ESTABLISHES NEW PATIENT SERVICES PROGRAM

The San Francisco Heart Association has established a cardiac and stroke rehabilitation project designed to meet the individual needs of heart and stroke patients living in San Francisco during hospital admission and continuing through recovery and assimilation back into a community living setting.

A Patient Services Coordinator and two liaison nurses will coordinate the program at Pacific Medical Center and the University of California Moffitt Hospital.

As a supplement to care provided by the patient's physician and nursing staff, observation and assistance will be given to the patient during his hospital stay and to the patient during recovery in his home environment.

Hospitalized cardiac and stroke patients will be admitted to the program following approval by the patient's physician and a review of the patient's hospital admission records.

UCSF PHYSICIANS CHAIR ACS MEETINGS HERE

Gordon F. Madding, M.D., Associate Clinical Professor of Surgery, was Chairman of the press relations committee at the 58th Annual Clinical Congress of the American College of Surgeons which convened in San Francisco October 2 to 6.

Nine other California surgeons assisted Dr. Madding in providing scientific information for the nation's press.

On Dr. Madding's committee were, from UCSF, Drs. William Blaisdell, Professor of Surgery, Donald M. Gallagher, Assistant Clinical Professor of Surgery, Orville F. Grimes, Associate Professor and Vice-Chairman, Surgery, Samuel L. Kountz, Associate Professor of Surgery and Co-Director, Transplant Service; Muriel Steele, Associate Professor of Surgery; and Philip R. Westdahl, Associate Professor of Surgery.

J. Englebert Dunphy, M.D., Professor and Chairman, Department of Surgery, is chairman of the Board of Regents, the policy-making body of the College.